

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

ADDRESS (number and street)

50 F Street NW

Suite 900

☐ Check if different than previously reported. (ACC)

Washington

DC

20001

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00002238

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐

Primary (12P)

☐

General (12G)

☐

Runoff (12R)

☐

Convention (12C)

☐

Special (12S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☒

General (30G)

☐

Runoff (30R)

☐

Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

DC

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Miss Kelsey A Swango

Signature of Treasurer

Miss Kelsey A Swango

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y 10 / 16 / 2014 To: M M / D D / Y Y Y Y Y 11 / 24 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2014		15207.82
(b) Cash on Hand at Beginning of Reporting Period.....	13856.98	
(c) Total Receipts (from Line 19)	12891.00	97651.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	26747.98	112858.82
7. Total Disbursements (from Line 31)	3152.98	89263.82
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	23595.00	23595.00
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

Report Covering the Period:

From:

M	M	/	D	D	/	Y	Y	Y	Y
1	0		1	6		2	0	1	4

To:

M	M	/	D	D	/	Y	Y	Y	Y
1	1		2	4		2	0	1	4

I. Receipts	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
11. Contributions (other than loans) From:		
(a) Individuals/Persons Other Than Political Committees		
(i) Itemized (use Schedule A).....	12891.00	64491.00
(ii) Unitemized	0.00	3910.00
(iii) TOTAL (add Lines 11(a)(i) and (ii))..... ▶	12891.00	68401.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	29250.00
(d) Total Contributions (add Lines 11(a)(iii), (b), and (c)) (Carry Totals to Line 33, page 5)	12891.00	97651.00
12. Transfers From Affiliated/Other Party Committees.....	0.00	0.00
13. All Loans Received	0.00	0.00
14. Loan Repayments Received.....	0.00	0.00
15. Offsets To Operating Expenditures (Refunds, Rebates, etc.) (Carry Totals to Line 37, page 5).....	0.00	0.00
16. Refunds of Contributions Made to Federal Candidates and Other Political Committees.....	0.00	0.00
17. Other Federal Receipts (Dividends, Interest, etc.).....	0.00	0.00
18. Transfers from Non-Federal and Levin Funds		
(a) Non-Federal Account (from Schedule H3)	0.00	0.00
(b) Levin Funds (from Schedule H5)	0.00	0.00
(c) Total Transfers (add 18(a) and 18(b))..	0.00	0.00
19. Total Receipts (add Lines 11(d), 12, 13, 14, 15, 16, 17, and 18(c))	12891.00	97651.00
20. Total Federal Receipts (subtract Line 18(c) from Line 19)	12891.00	97651.00

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	152.98	10263.82
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	152.98	10263.82
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	0.00	76000.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	3000.00	3000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	3152.98	89263.82
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	3152.98	89263.82

DETAILED SUMMARY PAGE of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	12891.00	97651.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	12891.00	97651.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	152.98	10263.82
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	152.98	10263.82

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 6 OF 11

☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

Full Name (Last, First, Middle Initial)

A. Mr. Dennis Bolling

Mailing Address 5655 Slater Rdg

City State Zip Code
Hilliard OH 43026-7477

FEC ID number of contributing
federal political committee.

C

Name of Employer
United Producers, Inc.

Occupation
President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 24 / 2014

Transaction ID : AE66AA4E3F4DA4C7F8AC

Amount of Each Receipt this Period

1250.00

Full Name (Last, First, Middle Initial)

B. Land O'lakes, Inc.

Mailing Address 4001 Lexington Ave N

City State Zip Code
Saint Paul MN 55126-2934

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y
10 / 29 / 2014

Transaction ID : A32D5E6B469F5407ABA7

Amount of Each Receipt this Period

5000.00

Full Name (Last, First, Middle Initial)

C. Plains Cotton Cooperative Association

Mailing Address PO Box 2827

City State Zip Code
Lubbock TX 79408-2827

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

500.00

Date of Receipt

M M / D D / Y Y Y Y Y
11 / 24 / 2014

Transaction ID : AF56403B7A6A94C9D975

Amount of Each Receipt this Period

500.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

6750.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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FOR LINE NUMBER:
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NAME OF COMMITTEE (In Full)

NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

Full Name (Last, First, Middle Initial)

A. Brad Schuler

Mailing Address 188 Lee Rd

City

Nicolaus

State

CA

Zip Code

95659-9761

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sunsweet Growers Inc.

Occupation

VP/Global Sales & Marketing

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

11 / 24 / 2014

Transaction ID : AF1DA25427D6F4452B7C

Amount of Each Receipt this Period

1000.00

Full Name (Last, First, Middle Initial)

B. Stephen Briggs

Mailing Address 2205 17th Ave SE

City

Aberdeen

State

SD

Zip Code

57401-7815

FEC ID number of contributing
federal political committee.

C

Name of Employer

South Dakota Wheat Growers

Occupation

Senior VP of Agronomy & Corporate Mark

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

540.00

Date of Receipt

11 / 24 / 2014

Transaction ID : AEB2A77C688204288B77

Amount of Each Receipt this Period

200.00

Full Name (Last, First, Middle Initial)

C. JoAnn Fuller

Mailing Address 113 Mabscott Dr

City

Madison

State

AL

Zip Code

35758-4223

FEC ID number of contributing
federal political committee.

C

Name of Employer

Alabama Farmers Cooperative

Occupation

Corporate Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

325.00

Date of Receipt

11 / 24 / 2014

Transaction ID : A77A5AFC47F4D40DCB4C

Amount of Each Receipt this Period

325.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1525.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

Full Name (Last, First, Middle Initial)

A. Mr. Al Cheatham

Mailing Address 2103 Pennylane SE

City

Decatur

State

AL

Zip Code

35601-6631

FEC ID number of contributing
federal political committee.

C

Name of Employer

Alabama Farmers Cooperative

Occupation

Corporate Controller

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

616.00

Date of Receipt

11 / 24 / 2014

Transaction ID : A33E218243F8445CAAF8

Amount of Each Receipt this Period

616.00

Full Name (Last, First, Middle Initial)

B. Dane Lance

Mailing Address 1014 Sunrise Ridge Dr

City

Lafayette

State

CA

Zip Code

94549-1751

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sunsweet Growers Inc.

Occupation

President & CEO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

11 / 24 / 2014

Transaction ID : A555522A8CAB24CD8998

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

C. Ana Klein

Mailing Address 8663 Pasatiempo Cir

City

Roseville

State

CA

Zip Code

95747-6339

FEC ID number of contributing
federal political committee.

C

Name of Employer

Sunsweet Growers Inc.

Occupation

Vice President / CFO

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

11 / 24 / 2014

Transaction ID : A5FA3E8DD03784D97963

Amount of Each Receipt this Period

1000.00

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

3116.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
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Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 9 OF 11

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NAME OF COMMITTEE (In Full)

NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

Full Name (Last, First, Middle Initial)

A. H. Rivers Myers III

Mailing Address 2003 Katie Dr. S.W.

City

Decatur

State

AL

Zip Code

35603-3331

FEC ID number of contributing
federal political committee.

C

Name of Employer

AFC

Occupation

CEO

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

1500.00

Date of Receipt

11 / 24 / 2014

Transaction ID : A4F952C35282A4FA5AF9

Amount of Each Receipt this Period

1500.00

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City

State

Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary
☐ Other (specify) ▼

☐ General

Aggregate Year-to-Date ▼

Date of Receipt

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

1500.00

12891.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 10 OF 11

<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

Full Name (Last, First, Middle Initial)

A. Suntrust Bank

Mailing Address 1445 New York Ave NW

City	State	Zip Code
Washington	DC	20005-2157

Purpose of Disbursement
Account Analysis Fee

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		21		2014

Transaction ID : B55B95675F97B4C5D9B0

Amount of Each Disbursement this Period

20.14

Full Name (Last, First, Middle Initial)

B. Suntrust Bank

Mailing Address 1445 New York Ave NW

City	State	Zip Code
Washington	DC	20005-2157

Purpose of Disbursement
Merchant Services Fee

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		03		2014

Transaction ID : B1D0E055BDDCE4DEAB66

Amount of Each Disbursement this Period

111.68

Full Name (Last, First, Middle Initial)

C. Suntrust Bank

Mailing Address 1445 New York Ave NW

City	State	Zip Code
Washington	DC	20005-2157

Purpose of Disbursement
Account Analysis Fee

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For:
<input type="checkbox"/> Primary <input type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		21		2014

Transaction ID : BB7383EA5BEC945E2B69

Amount of Each Disbursement this Period

21.16

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

152.98

152.98

SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 11

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input checked="" type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

NATIONAL COUNCIL OF FARMER COOPERATIVES CO-OP/PAC

Full Name (Last, First, Middle Initial)

A. Jim Costa For CongressMailing Address 2037 West Bullard
Pmb # 509

City Fresno State CA Zip Code 93711-1200

Purpose of Disbursement
Count the Ballots for Jim Costa

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For: 2014
☐ Primary ☐ General
☒ Other (specify) ▼
Recount2014

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y
11		20		2014

Transaction ID : B20BEAD4B06B646DD9A4

Amount of Each Disbursement this Period

3000.00

B.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

--

C.

Full Name (Last, First, Middle Initial)

Mailing Address

City State Zip Code

Purpose of Disbursement

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ PresidentDisbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State:

District:

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y Y

Amount of Each Disbursement this Period

--

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

3000.00

3000.00
